F0000003380

TRANSMITTAL LETTER

То:	Registration					8 28
	Division of	Corporations				
SUBJ	ECT: HO	SPITAL CENTRAL SER	VICES CO	OOPERATIVE, INC.		
		(Name of	f corporation	on - must include suffix)		RY OF CORPC
Dear	Sir or Madam	:				STAT ORAT
"Cert		tence", and check are sub		Authorization to Transac register the above referen		
Please	e return all cor	respondence concerning	this matte	to the following:		
		Thomas D. Fe	nstermac	cher		
			(Name o	f Person)		#
		Hospital Cen	tral Se	vices Cooperative,	Inc	
			(Firm/Co	ompany)		
		/ 2171 28th S	st., s.w.			
				ress) <u>901</u>	0003259	<u> </u>
	(Allentown, F	PA 18103	3	-U5/19/UU ******78.00	01059003 *****70.00
		\	(City/St	ate/Zip)		,
Shoul	d you need to	call someone concerning	g this matte	er, please call:		· \$ 18
				<u> </u>		Mother L.
Tho	mas D. Fens	stermacher at	(610) 791-2222	<u> </u>	701, 101, 20
	(Name of)	Person)	(Area	Code & Daytime Telepl	none Number)	Céne \
		Availability			(B)	15/6/K
STRI	EET ADDRE	Cocument VI III		791-2222 Code & Daytime Teleph	E The Mark	M. M.
	SEI ADDRE	Updater		WELLET (G TEDENCE)		8, CV
Regis	tration Section	1	6, 1	Registration Section		10/01
Divisi 400 E	ion of Corpora . Gaines St.	dions	COL	Division of Corporatio P.O. Box 6327	ns 🖰	.
Tallat	assee, FL 32	399 aknowledgement		Tallahassee, FL 32314		
		P. Verifyer for the following amount		The Ell the	, FF	\$70
⊠ \$7∮	0.00 Filing Fe	e 🗖 \$78.75 Filing F	ee &	\$78.75 Filing Fee &	☐ \$87.50 Filin	g Fee,
	-	Certificate of S	tatus	Certified Copy	Certificate Certified C	

April 18, 2000

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314



HOSPITAL CENTRAL SERVICES COOPERATIVE, INC.

LAUNDRY E GROUP PURCHASING E CREDIT AND COLLECTIONS

2171 28th Street, S.W. ■ Allentown, PA 18103 610-791-2222 ■ 800-444-HCSC FAX 610-791-4514

Registration Section Staff:

This letter, the enclosed Application by Foreign Profit Corporation for Authorization to Transact Business in Florida, and the Application for Registration of Fictitious Name hereby provide written notification to make the following changes to your Florida Department of State Division of Corporation records. Please make the following company name and federal tax ID number changes to your records:

PLEASE QUALIFY FOREIGN PROFIT CORPORATION FIRST REGISTER FICTITIOUS NAME SECOND

From:

HCSC Enterprises, Inc. Florida Document # P19449 Federal Tax ID # 232210758 <u>To:</u>

Hospital Central Services Cooperative, Inc. dba HCSC Credit and Collections Federal Tax ID # 231709244

Prior to 7/1/99, our HCS-Credit Services division, which was conducting business within the state of Florida, was a division within HCSC Enterprises, Inc., Federal Tax ID # 232210758. However, as of the beginning of our fiscal year on 7/1/99, the HCS-Credit Services division was eliminated due to some corporate restructuring. Subsequently, this healthcare credit and collections function was moved into the HCSC Credit and Collections division of the already existing affiliated HCSC company, Hospital Central Services Cooperative, Inc., which is also incorporated in the state of Pennsylvania. Now, as of 7/1/99, the Credit and Collections division of Hospital Central Services Cooperative, Inc., Federal Tax ID # 231709244 will be continuing this business in the state of Florida, thus requiring the annual filing of Florida's Uniform Business Report.

If there are any further questions regarding the above company name and federal tax ID number changes, please contact either myself or Jim Painter, Staff Accountant, at (610) 791-2222.

Sincerely,

Thomas D. Fenstermacher Vice President - Finance

Hospital Central Services Cooperative, Inc.

2171 28th St. S.W.

romas

Allentown, PA 18103-7073



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 1, 2000

THOMAS D FENSTERMACHER 2171 28TH ST., S.W. ALLENTOWN, PA 18103

SUBJECT: HOSPITAL CENTRAL SERVICES COOPERATIVE, INC.

Ref. Number: W00000013938

We have received your document for HOSPITAL CENTRAL SERVICES COOPERATIVE, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$1150.00.

Enclosed please find a copy of section 607.1501, 617.1501, or 608.502, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a notarized affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501, 617.1501 or 608.502, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays Document Specialist

Letter Number: 800A00030863

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

A. Hospital	Central <u>Services Cooperative,</u>	Inc.			
(Name of corpo	ration; must include the word "INCORPOR riations of like import in language as will c	RATED", "COMP learly indicate tha	ANY", "CORPORATION" at it is a corporation instead	or of a	
natural person o	or partnership if not so contained in the nam	ne at present.)			
		2	23-1709244		
2. Pennsylva	nna y under the law of which it is incorporated)	3	(FEI number, if applica	ble)	
(State or country			`		
4. 1/23/67	5	Perpetual	corp. will cease to exist or	7.75	
		•	corp. will cease to exist or	"perpetual")	
6. 7/1/99	(under charter # P19)	449)			
(Date first trans:	acted business in Florida. If corporation ha	s not transacted b	usiness in Florida, insert "up	on qualifica	tion.")
(2000 11100 1111111	(SEE SECTIONS 607.1	501, 607.1502 and	d 817.155, F.S.)		
3500 37 (Cedar Crest Blvd., Suite 205,	Allentawn. H	PA 18104		
7. a. 1503 N. C	(Principal office	address)			
	· -			80	₹.
b. 2171 281	th Street, S.W., Allentown, PA	18103			- <u>SE</u>
	(Current mailing	address)		=	XX
	•			င်္ထ	TA:
8 Healthca:	re Credit and Collections Serv	rices			86
(Purpose	(s) of corporation authorized in home state	or country to be o	carried out in state of Florida	i) 📆	PORATIONS
· -					AT A
9. Name and str	eet address of Florida registered ager	it: (P.O. Box or	r Mail Drop Box <u>NOT</u> acc	ceptable),	200
					٠,
Name:	Jesse Crim		•	-	
	Medical Consumer Counseling 1325 San Marco Blvd.				
Office Address:	Suite 401		ar-		
	Jacksonville	, Florid	la 32207		
		,,	(Zip code)	-	•

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

A. DIRECTOR	
Chairman:	
•	Thomas Byrnes St. Luke's Hospital
Address:	St. Luke's Hospital 801 S. Ostrum St. Pothlishem PA 18015
	Bethlehem, PA 18015
Vice Chairman:	Gregory Kuntz
	Hazleton General Hospital
Address:	700 E. Broad St. Hazleton, PA 18201
Director:	Frank DiBiaso
	Gnaden Huetten Memorial Hospital
Address:	llth & Hamilton Streets Lehighton, PA 18235
Director:	J. Michael Lee
Address:	2171 28th Street, S.W.
	Allentown, PA 18103
B. OFFICERS	S
President:	J. Michael Lee
Address:	2171 28th Street, S.W.
	Allentown, PA 18103 -
Vice President:	James Burns
Address:	1503 N. Cedar Crest Blvd., Suite 205
	Allentown, PA 18104
Secretary:	Shirley Frederick
Address:	2171 28th Street, S.W.
	Allentown, PA 18103
Treasurer:	Thomas D. Fenstermacher
Address:	2171 _28th Street, S.W.
	Allentown, PA 18103
NOTE: If nece	essary, you may attach an addendum to the application listing additional officers and/or directors.

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

(Typed or printed name and capacity of person signing application)

Thomas D. Fenstermacher, Vice President-Finance

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE

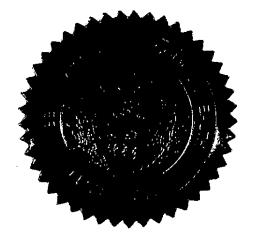
APRIL 24, 2000

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT?

HOSPITAL CENTRAL SERVICES COOPERATIVE, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office $show_1$ as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

DBOH